REQUEST FOR INTERPRETER (HEARING-IMPARED)			DOCKET NO.: 16 XXXX
Representative's Name Business Address City, State, ZIP Telephone/Fax	Curly J. Howard Howard, Fine, & 878 Wiseguy Wa Anywhere, NE 68 (402) 555-5555	ay	
Type of interpreter requested:	☐ I request a telephone hearing through a TTY / TDDdevice ☐ I request an "in person" hearing with an American Sign Language Interpreter. (If you are requesting an in-person hearing, please select a location for the hearing.)		
	☐ Omaha	□ Lincoln	Other:
Please list the dates and times in the next 30 days that you or you client would be available for hearing	March 7, 2016, March 15, 2016, march 20, 2016.		
Please Sign and Date Here:	Signature Date		
DO NOT ENTER INFORMATION BELOW : FOR TRIBUNAL USE ONLY			
Judge's Determination	☐ Request Granted ☐ Request Denied ☐ Other:		
Judge's Signature:			
IN-PERSON H	EARING SCHEDULING		FOR TRIBUNAL USE ONLY
Assigned Judge:			
Date of Hearing:			
Time of Hearing:			
Request timely?	☐ Yes	□ No	(Affix Date Stamp Here)
Location of Hearing:			
Requesting Party Notified:	Date T	ime	☐ Notice of Hearing ☐ TTY / TDD ☐ Text Message
Other Party Notified:	Date T	ime	□ Notice of Hearing □ Telephone □ Voice Mail